

**LEGISLATIVE SERVICES AGENCY
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FISCAL IMPACT STATEMENT

LS 7105

BILL NUMBER: HB 1679

NOTE PREPARED: Jan 12, 2009

BILL AMENDED:

SUBJECT: Human Toxic Exposure Program.

FIRST AUTHOR: Rep. Dvorak

FIRST SPONSOR:

BILL STATUS: As Introduced

FUNDS AFFECTED: X GENERAL
DEDICATED
FEDERAL

IMPACT: State

Summary of Legislation: This bill requires the State Department of Health (SDH) to establish a Human Toxic Exposure Program to identify and assess the concentration of toxic chemicals in the bodies of individuals. The bill also establishes the Human Toxic Exposure Advisory Panel. The bill requires SDH to issue reports to the General Assembly and post certain information on an Internet web site.

Effective Date: July 1, 2009.

Explanation of State Expenditures: *State Department of Health:* This bill would require that SDH implement a human toxic exposure program that is intended to assess and identify in individuals the concentration of toxic chemicals obtained from specimens. SDH is authorized to work with the Indiana Department of Environmental Management (IDEM) and the U.S. Centers for Disease Control and Prevention (CDC) to provide this program.

Additionally, this program must include components that will assist in monitoring for and responding to chemical and biological attacks. For this component, SDH can work with Indiana Department of Homeland Security (IDHS), the U.S. Department of Homeland Security, and the CDC. During every odd year after 2013, SDH is also required to file a report with the General Assembly regarding activities of the program. The bill also requires SDH to operate a website that contains this report, summaries of all health and toxic chemical exposure data collected, and an explanation of the program.

The fiscal impact of this bill will depend upon how the ISDH develops and implements the provisions of the bill and the level of federal funding that might be available to expand upon existing activities.

Advisory Panel: The legislation requires SDH to provide staffing and support for a nine-person Human Toxic Exposure Advisory Panel. The legislation provides that the eight Panel members appointed by the Governor are not entitled to the minimum per diem, but members are entitled to reimbursement for travel expenses. The panel is required to meet at the call of the Chairperson, but must meet at least twice per year. The bill also states that the panel is responsible for making recommendations concerning the design of the program and review of program priorities, protocols, reports, and outreach materials. The expenses of the Panel would depend on when the appointments are made, the number of meetings attended by members, and the members' geographic locations. The bill does not specify the source of funding for the Panel's travel expenses.

Indiana Department of Environmental Management: This bill may increase the workload of IDEM staff to the extent that they work in conjunction with SDH to provide the human toxic exposure program. Actual increases in workload will depend upon the contributions from IDEM. IDEM reported that this bill would require resources. Environmental research, developing of demographic and geographic models, environmental staffing for the joint program, computer system development for tracking confidential medical information, and reporting and comparative analysis of data would be required to meet the requirements of the bill. IDEM estimates requiring two additional staff positions as well as costs for computer system development. Total costs experienced by IDEM during the first year of implementation are estimated at \$181,000 and second-year costs are estimated at \$104,000.

Indiana Department of Homeland Security: The bill requires IDHS staff to provide guidance to ISDH when incorporating program components that will monitor and respond to chemical and biological attacks. IDHS reports that these provisions will have no fiscal impact on workload and staff as this guidance is already provided.

Federal Grants: The CDC has recognized that their Environmental Health Laboratory does not have the time or resources to address each state or region's individual health concerns. State departments of health frequently request the assistance of the Environmental Health Laboratory for investigations of geographic clusters of cancer, birth defects, or known environmental exposures to toxic chemicals since the states lack the ability to do the biomonitoring testing necessary. In FFY 2002, the CDC issued \$10 M in grant funds to states for biomonitoring plan development over a two-year period. In FFY 2004, the agency issued another \$2.7 M for implementation grants. Several of the grants were for consortiums of states in regions with similar concerns. Indiana did not receive any funding under this program. It is not known if the CDC has additional planning and implementation funds available for this initiative.

Background Information:

State Biomonitoring: The oldest and probably best known biomonitoring initiative is the Childhood Lead Screening Program. The CDC's 1976 biomonitoring study of lead levels in children's blood ultimately resulted in the removal of lead additives from gasoline. The SDH continues to monitor lead levels in children under age seven. Additionally, it is a federal requirement that Medicaid children be tested for blood lead levels. In order to conduct lead monitoring activities for children throughout the state, the SDH receives a federal grant that pays for the expenses associated with maintaining seven staff positions. However, the grant does not provide funds for laboratory testing. The SDH reports that lead tests cost the state about \$17 each, and approximately 15,160 samples were tested in the SDH's lab in FY 2006. The laboratory testing expense is paid with funds provided from the SDH's main administrative appropriation. The state of Pennsylvania selected an expansion of its existing Childhood Lead Poisoning Prevention Program as its first biomonitoring initiative under a federal CDC planning grant.

ISDH Appropriations: The Indiana State Department of Health administrative appropriations were made from the General Fund and the dedicated Tobacco Master Settlement Agreement Fund for FY 2008 and the General Fund in FY 2009. Revenues from fees and penalties collected by the ISDH are deposited in the state General Fund, with augmentation allowed in amounts not to exceed the additional revenue from fees or penalties received after July 1, 2003.

Explanation of State Revenues:

Explanation of Local Expenditures:

Explanation of Local Revenues:

State Agencies Affected: ISDH; IDEM; IDHS.

Local Agencies Affected:

Information Sources: Scott Zarazee, SDH; Pam Bright, IDHS; Sandra Flum, IDEM.

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